

Preparing EVV for ODM Changes

October 27, 2022

1:30pm – 3:00pm

Hosted by:

The Ohio Department of Medicaid (ODM) & Sandata Technologies

Sound Test



We are testing sound at this time.

If you cannot hear the sound test, please check the volume on your speakers or listening device.

If you continue to have problems, a recorded webinar will be placed on the Ohio Department of Medicaid's website

Intended Audience

This presentation is intended for Agency and Independent providers that use:

- » The Sandata Electronic Visit Verification (EVV) system provided by the state; or
- » Agency providers that use an Alternate (Alt) EVV System

Also intended for Stakeholders interested in hearing ODM updates as they relate to the Ohio EVV program.



Objectives

- Background
- Provider Network Management (PNM) Module
- Next Generation Managed Care
- Helpful EVV Reports in Aggregator
- Resources and Q&A



Background

Background

What is Electronic Visit Verification (EVV)?

EVV is a tool for electronically capturing point-of-service information for certain home and community-based services. It is used to document the time services begin and end, the provider, the Medicaid recipient and the location of the service.

- » December 2016, Congress passed the 21st Century Cures Act requiring state Medicaid programs to implement an EVV system for certain home and community-based services. [Section 12006\(a\) of the 21st Century Cures Act.](#)
- » January 8, 2018, ODM began using an EVV system and implemented in [Ohio Administrative Code Rule 5160-1-40 | Electronic visit verification \(EVV\).](#)
- » EVV helps to reduce fraud, waste and abuse in the Medicaid system and ensures individuals are receiving the care they need.

The Ohio EVV Program

- Single program applies to all applicable Medicaid services, including those administered by ODA, DODD and Managed Care Organizations (MCOs)
- The State-provided system available through Sandata Technologies is offered to all providers at no cost
- Agency providers can choose to use the Sandata system or an Alternate (Alt) EVV system

One System, Two Parts:

1. Visit Capture Module
 - Captures start and end of a visit
2. Aggregator Module
 - Standardizes data from all EVV vendors

3 Methods of Visit Capture:

1. Mobile application, using a State-provided device or provider's personal smart device
2. Telephony
3. Manual visit entry

Provider Responsibility

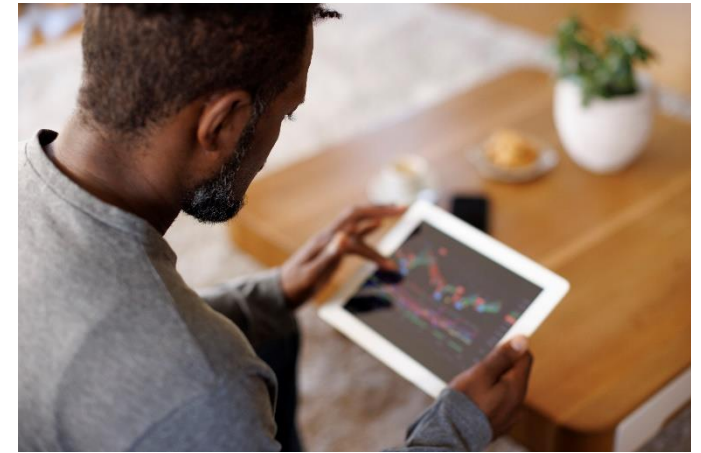
- ✓ Complete Required Training*
 - » Agency providers – Overview and security modules
 - » Agency providers using Alt System – Aggregator module
 - » Independent providers – Overview module
- ✓ Create individual (client) records in the EVV system*
- ✓ Create employee records (for agency providers)*
- ✓ Capture visits in the EVV system
- ✓ Ensure visits are accurate
 - » Clear exceptions
 - » Edit visits if needed
- ✓ Ensure visit is in **Verified Status** in the Aggregator before billing for service

** Some of these steps may look different if you are an agency provider using an Alt EVV System. Be sure to consult your vendor on these steps.*

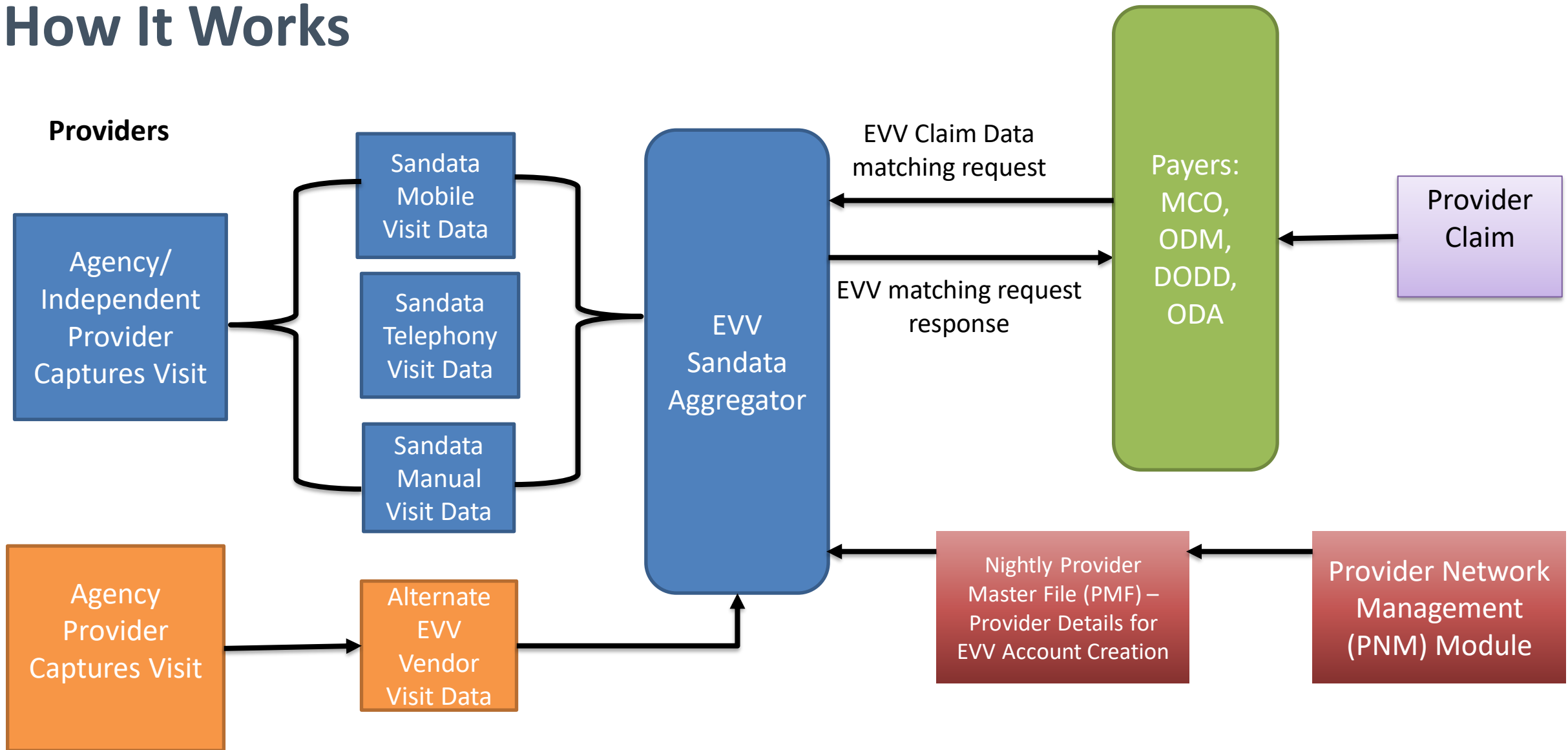


EVV and Claims

- When a claim is processed, the EVV aggregator is queried for a supporting visit.
- Visits are matched to claims using 5 data elements:
 - » Individual
 - » Billing Provider
 - » Date of Service
 - » Service Provided
 - » Units
- Units in the EVV system must be equal to or greater than units on the claim.
- ODM will notify providers and stakeholders in advance of turning on claim edits that impact payment.



How It Works



Provider Network Management (PNM) Module

PNM Module

- The PNM module went live earlier this month, on October 1st
- Portal functions include:
 - » Claims submissions;
 - » Prior authorizations; and
 - » Member eligibility verification.
- Allows providers to submit a single Ohio Medicaid enrollment and credentialing application (when required), simplifying and streamlining administrative activities for providers.
- Provides a single entry-point for enrollment, revalidations, credentialing, and more.

PNM and EVV

There are a few PNM impacts to EVV:

1. EVV Training Certificate Required

- » **What:** The EVV Training Certificate is now required when applying in the portal to become a new Medicaid provider for services subject to EVV requirements.
- » **Who?** New providers onboarding in the PNM module or current providers revalidating their Medicaid provider agreement in accordance with OAC 5160-1-17.4.

2. The email address in the Primary Service Address screen is required and must be current in PNM for EVV account creation

- » **What:** EVV accounts are created from provider data in the PNM. If an email is missing in the Primary Service Address screen, your EVV account will not be created.
- » **Who?** All providers of services subject to EVV requirements.

PNM: EVV Training Certificate or Attestation Required

The EVV Training Certificate is now required when applying in the PNM portal to become a Medicaid provider of services subject to EVV. PNM will prompt providers with the following:

EVV Training

EVV Training or Attestation Completed*

☐ Yes ☐ No

EVV Training or Attestation Completed Date*

Agency Provider Training:

[EVV Agency Provider Training](#)

Independent Provider Training:

[EVV Independent Provider Training](#)

Upload file

Any providers that were converted and did complete EVV training, should see a ‘Yes’ marked in the system.

PNM: EVV Training Certificate

Which EVV Training Certificate is required?

Providers are required to complete the following training to access the EVV Certificate and start using the EVV system:

- [Agency Training](#)
 - Overview (45 mins) and Security (15 mins) Modules
- [Non-Agency Training](#)
 - Independent Providers
 - Overview (45 mins) Module
- [Aggregator Training](#)
 - Agency providers using an Alternate (Alt) EVV System
 - Overview (60 mins) Module

PNM: EVV Training Certificate



NOTE: The title on the certificate will correspond with the course name.

PNM: How Will PNM Know To Ask for Certificate?

PNM asks for an EVV Training Certificate if your Provider Type and Specialty are one of the following:

Provider Type	Specialty
16 - OTHER ACCREDITED HOME HEALTH AGENCY	160 - OTHER ACCREDITED HOME HEALTH AGENCY
25 - NON-AGENCY PERSONAL CARE AIDE	161 - ODM OTHERWISE ACCREDITED HOME HEALTH AGENCY
26 - NON-AGENCY HOME CARE ATTENDANT	250 - ODM WAIVER NON-AGENCY PERSONAL CARE AIDE
38 - NON-AGENCY NURSE -- RN OR LPN	260 - ODM WAIVER NON-AGENCY HOME CARE ATTENDANT
45 - WAIVERED SERVICES ORGANIZATION	380 - RN- PRIVATE DUTY NURSING
50 - CLINIC	381 - PDN/ODM WAIVER REGISTERED NURSE
55 - WAIVERED SERVICES INDIVIDUAL	382 - LPN - PRIVATE DUTY NURSING
60 - MEDICARE CERTIFIED HOME HEALTH AGENCY	383 - PDN/ODM WAIVER LICENSED PRACTICAL NURSE
65 - CLINICAL NURSE SPECIALIST INDIVIDUAL	480 - ODA WAIVER
71 - NURSE MIDWIFE INDIVIDUAL	490 - DODD WAIVER
72 - NURSE PRACTITIONER INDIVIDUAL	492 - DD Waiver and Nursing
76 - DURABLE MEDICAL EQUIPMENT SUPPLIER	600 - MEDICARE CERTIFIED HOME HEALTH AGENCY
83 - WHEELCHAIR VAN	601 - ODM MEDICARE CERTIFIED HOME HEALTH AGENCY
89 - NON-STATE OPERATED ICF-MR	

PNM: EVV Attestation

A provider that meets the Provider Type and Specialty rule in the previous slide, but does not render services that require EVV, may complete the EVV Attestation instead of completing the EVV Training.

- A few provider examples that this applies to:
 - » Transportation only providers
 - » Home delivered meal providers

Attestation found on the [ODM Tools and Help Documents](#) website:

[Medicaid](#) / [Resources for Providers](#) / [Programs & Initiatives](#) / [Electronic Visit Verification](#)

Tools And Help Documents

EVV program information, Sandata system, telephony, and device references, Zendesk job aids

Service providers who do not provide services subject to EVV, but who are prompted to upload the EVV training certificate in PNM (Provider Network Management), may upload the [EVV PNM Attestation](#) instead of completing EVV training.

EVV Program

- [Programs and Procedure Codes Included in EVV](#)
- [Time/Units Conversion Table](#)
- [FAQs](#)

Primary Service Location Email in PNM

- The Primary Service Address Email Address 1* in PNM is used to automatically create an EVV account in the Sandata system.
- Some providers do not get accounts created due to this missing piece of information.
- It is important your email is added in the following screen of PNM and current:

Jump To: Primary Service Address

Credentialing Contact → Primary Service Address* → Billing & Payment Address* → Correspondence

Phone Number 1* 1-800-686-1516

Phone Ext 1

Phone Number 2

Phone Ext 2

Fax Number 1

Fax Number 2

Contact Name Provider Integrated HelpDesk

Email Address 1*

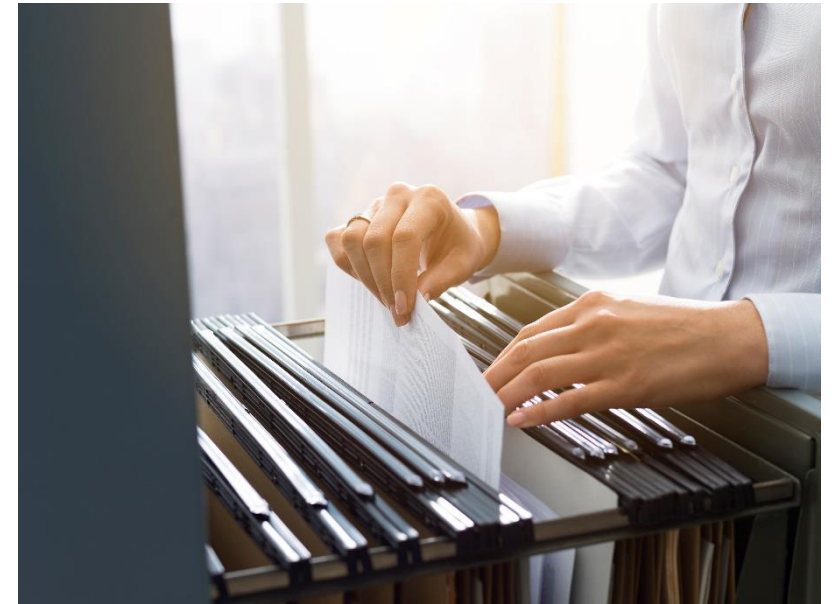
Step by Step Guide on how to update the email address in PNM for EVV can be [found online](#).

Next Generation Managed Care

3 New MCOs - 12/1

Next Generation Managed Care

- 7 Managed Care Organizations (MCOs) were selected for the Next Generation of Managed Care in Ohio:
 - » AmeriHealth Caritas Ohio, Inc. - **New**
 - » Anthem Blue Cross and Blue Shield - **New**
 - » Humana Healthy Horizons in Ohio - **New**
 - » Buckeye Community Health Plan
 - » CareSource Ohio, Inc.
 - » Molina Healthcare of Ohio, Inc.
 - » UnitedHealthcare Community Plan of Ohio, Inc.
- New MCOs will be effective December 1, 2022
- No EVV changes for MyCare Ohio plans or their network providers



3 New MCOs and EVV

Starting this month, Providers can see the 3 new plans as Payer options in the Client Record page of the Sandata EVV system:

Add/Edit Payer

CLIENT NAME

CLIENT ID #

MEDICAID ID #

SUPERVISOR

None

None

None

None

* indicates required field

PAYER *

Select Payer

Select Payer

Aetna
 Amerihealth Caritas
 Anthem
 Buckeye
 CareSource
 DODD
 Humana
 Molina
 ODA
 ODM
 Paramount
 UHC

PROGRAM *

Select Program

FROM DATE * MM/DD/YYYY

Select From Date

SERVICE *

Select Service

TO DATE MM/DD/YYYY

Select To Date

CANCEL

ADD

Enter Zip Code

History

No Data Found!

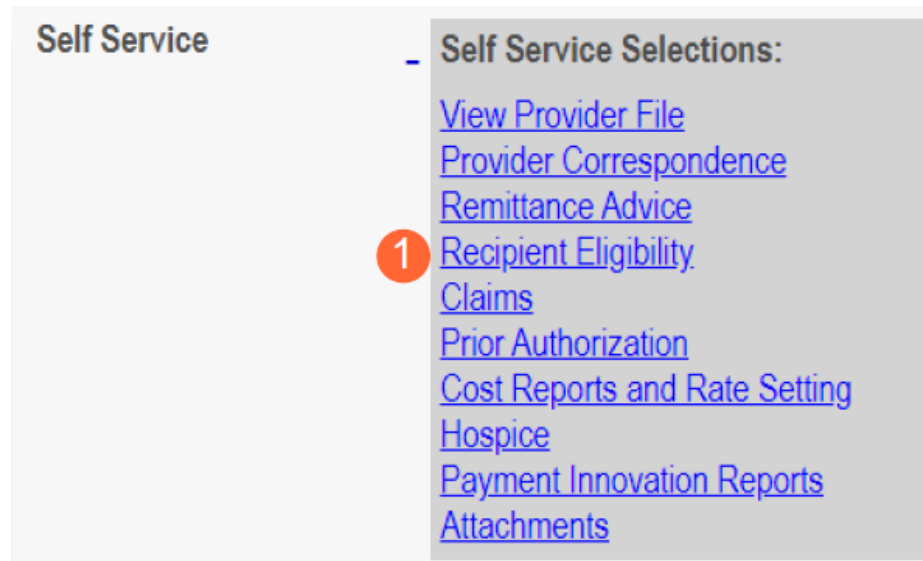
Alt EVV Systems that support providers who serve individuals enrolled in any of the 3 new MCOs must add the 3 new MCOs to their systems before 12/1

When can an Individual Change MCOs?

- For Next Generation Managed Care enrollment, individuals can change MCOs:
 - » Once a year during open enrollment in the Fall
 - » If there is just cause reason
- In 2022, MCO changes will be effective December 1, 2022
- Individuals enrolled in a MyCare Ohio Plan as an Opt-in member can change MCOs each month.

How to Lookup an Individual's Coverage?

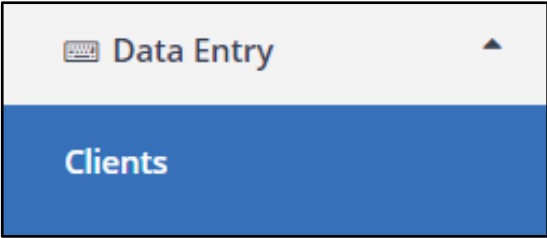
- It is important to include the individual's correct payer in the Sandata system. This is the payer you will bill for services rendered.
- An Individual's coverage and eligibility can be viewed in the PNM Portal



- Each Medicaid recipient will receive a Medicaid card including their MCO enrollment, SPBM pharmacy benefit and their Medicaid ID.

How to Update the Payer, Program and Service in Sandata's System

- Click **Data Entry**, then click **Clients**



- Search for the client record, then click the pencil icon next to the client's name to open the record details

CLIENT LAST NAME

Smith

CLIENT FIRST NAME

James

CLIENT ID

Enter Client ID

CLIENT MEDICAID ID

Enter Client Medicaid ID

STATUS

Active

Q SEARCH

CLEAR

«

<

1


>

»

ROWS PER PAGE:

20

Showing 1 to 1 of 1 entries

Last Name	First Name	Client ID	Client Medicaid ID	Status	Actions
Smith	James	399962	190190190190	Active	 



How to Update the Payer, Program and Service in Sandata’s System

- In the client payer section, add an end date for any service that is no longer applicable, then
- Add the new payer, program, and service details for the individual

Client Payer

Add New

History

FROM DATE	TO DATE	CLIENT PAYER ID	PAYER	PROGRAM	SERVICE	ACTIONS
01/11/2022			DODD	DD	IO NSG - LPN (T1003)	 

Showing 1 to 1 of 1 entries

«

<

1

>


»

How to Update the Payer, Program and Service in Sandata's System

- Click the pencil icon, and add the last date that the service applied
» This is called 'end-dating' the service

Client Payer

[Add New](#)[History](#)

FROM DATE	TO DATE	CLIENT PAYER ID	PAYER	PROGRAM	SERVICE	ACTIONS
01/11/2022			DODD	DD	IO NSG - LPN (T1003)	

Add/Edit Payer

CLIENT NAME

Davis, Daniel

CLIENT ID #

143427

MEDICAID ID #

999999999996

SUPERVISOR

None

* indicates required field

PAYER *

DODD

PROGRAM *

DD

SERVICE *

IO NSG - LPN (T1003)

CLIENT PAYER ID

Enter Client Payer ID

FROM DATE * MM/DD/YYYY

01/11/2022

TO DATE MM/DD/YYYY

10/08/2022

CANCEL

SAVE

[Editing Client Payer Details](#)

How to Update the Payer, Program and Service in Sandata's System

- Click Add New, and complete all required fields for the new service

Client Payer

Add New

History

FROM DATE	TO DATE	CLIENT PAYER ID	PA
01/11/2022			D

Showing 1 to 1 of 1 entries

Add/Edit Payer

CLIENT NAME

CLIENT ID #

MEDICAID ID #

SUPERVISOR

Davis, Daniel

143427

999999999996

None

* indicates required field

PAYER *

PROGRAM *

SERVICE *

Amerihealth Caritas

SP

SPHH Nsg - LPN (G0300)

CLIENT PAYER ID

FROM DATE * MM/DD/YYYY

TO DATE MM/DD/YYYY

Enter Client Payer ID

10/18/2022

Select To Date

CANCEL

ADD





[Editing Client Payer Details](#)

How to Update the Payer, Program and Service in Sandata’s System

- The end-dated service will move to the History tab, after the client record is saved
- The active service will remain on the record for visit capture

Add New

History

FROM DATE	TO DATE	CLIENT PAYER ID	PAYER	PROGRAM	SERVICE	ACTIONS
01/11/2022	10/08/2022		DODD	DD	IO NSG - LPN (T1003)	 
10/18/2022			Amerihealth Caritas	SP	SPHH Nsg - LPN (G0300)	 

Showing 1 to 2 of 2 entries

«

<

1

>

»

[Editing Client Payer Details](#)

Helpful EVV Reports in Aggregator

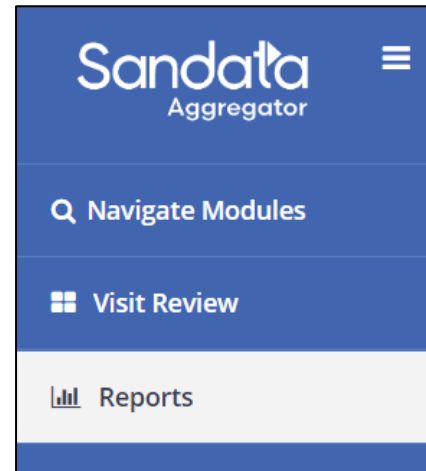
Reports Overview

- The Sandata EVV and Sandata Aggregator Reports tab is used to view and export visit data and records. You can use the reports tab to see a summary of your EVV system organized by different data points.
- If you are using Sandata EVV, changes to data will need to be made in Data Entry, Security, and/or Visit Maintenance.
- If you are using an alternate vendor, changes to data will need to be made in your source system.

NOTE: Reports are a free and optional resource.

Running Reports in the Sandata Aggregator

In the Aggregator portal, click Reports



Select an Access Group

Select Report

CORPORATION

Select Access Group

▼

Running Reports in the Sandata Aggregator

Select the Report Type, then select the Report Name

- Reminder: a full listing of reports is available in the Aggregator User Manual at the bottom of the portal
- The report type (daily, date range, billing, or security) determines the options in the Report Name dropdown

REPORT TYPE

Date Range Reports

Select Timeframe

* indicates required field

FROM DATE * MM/DD/YYYY

10/06/2022

REPORT NAME

Detail Visit Status

Select Report Name

Client Visit Summary

Detail Visit Status

Full Visit Export

Summary Visit Status

Visit Log

Visit Verification Activity Summary

Visit Verification Exception





Running Reports in the Sandata Aggregator

Select a date range

- A date range report will default to the last 14 days of visits
- A daily report will default to the last calendar day
- Each report will list date constraints below the calendar icon

Select Timeframe

* indicates required field

FROM DATE * MM/DD/YYYY	TO DATE * MM/DD/YYYY
<input type="text" value="10/01/2022"/> 	<input type="text" value="10/19/2022"/> 
FROM TIME * HH:MM AM/PM	TO TIME * HH:MM AM/PM
<input type="text" value="12:00 AM"/> 	<input type="text" value="11:59 PM"/> 

Note: The range for this report cannot exceed 730 days.

Running Reports in the Sandata Aggregator

Select parameters, then click Run Report

- The credentialing process determines which agencies you can select
- You should only see and select your own agency
- All other parameters are optional, and can be omitted after exporting the report

Select Parameters

ACCOUNT

Test p1 to p2 Agency (25090)

PROGRAM

All selected (10)

PAYER

All selected (12)

SUPERVISOR

All

VISIT STATUS

All selected (5)

CLEAR

RUN REPORT

36

Aggregator Reports – Additional Report Samples

Report Type	Report Name	Content	Application (How can this help me?)
Daily	Visit Listing	Payer, Account, Account Name, Client Name, Client Medicaid ID, Employee Name, Employee Santrax ID, Employee SSN, Start Time, End Time, Group Visit Code, Status	Make sure that visit information captured in your alternate vendor system is in a verified status (no missing or inaccurate information), and ready for claims matching.
Date Range	Detail Visit Status	Visit Key, Visit ID, Client Medicaid ID, Client Name, Phone Number, Employee Name, Service, Group Visit Code, Visit Date, Start Time, End Time, Adjusted Start Time, Adjusted End Time, Unresolved Exceptions	For incomplete visits, see a listing of all items that are missing from the visit record, and items on the record that do not match the client or employee details.
Billing	Visit Claims Verification Status	Payer, Program , Service, HCPCS, Client Medicaid ID, Visit Date, Start Time, End Time, Group Visit Code, Status, Batch ID, Transaction ID, Visit Verified Date	Once a claim has been submitted, see the claim details associated with matched EVV visits. If a visit did not match a claim, see the current visit status in EVV.

Resources and Questions

Additional Opportunities

Provider 1-1 Sessions

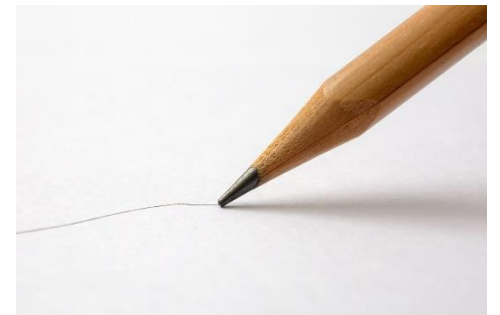
- Speak with a Sandata trainer in a private Zoom call, and receive help with your EVV system

EVV Deep Dive Series

- The next webinar in the series will cover System Setup

Monthly Webinar Series

- Presenting solutions to EVV issues affecting the provider population
- Example: Increasing Auto Verification, Getting Started with EVV



EVV Contacts

Contacts	Types of Questions Fielded
Sandata EVV Provider Hotline ODMCustomerCareEmail@sandata.com 855-805-3505 Hours of Operation: Mon-Fri, 7am-8pm, Sat-Sun, 9am-5pm	<ul style="list-style-type: none"> ▪ Sandata technical questions ▪ Device Help ▪ Getting Started with EVV ▪ EVV Visit Maintenance
ODM EVV Team ODMEVV@sandata.com 614-705-1082	<ul style="list-style-type: none"> ▪ EVV policy questions ▪ Services subject to EVV ▪ EVV and claims matching logic ▪ Alternate EVV requirements
ODM Provider Assistance 800-686-1516	<ul style="list-style-type: none"> ▪ Questions on account in PNM ▪ Billing questions ▪ Identify provider Medicaid provider ID ▪ Updating contact information
Medicaid Fraud medicaidfraud@medicaid.ohio.gov 800-282-0514	<ul style="list-style-type: none"> ▪ To report suspected or potential Medicaid fraud and abuse

EVV Helpful Resources

Resource Title	Description
<u>ODM EVV Fact Sheet</u> <i>pdf document</i>	One page summary of the EVV program for providers, agency staff, case managers, and others.
<u>ODM EVV page</u> <i>Webpage</i>	The general ODM EVV webpage for providers and stakeholders.
<u>EVV Newsletters</u> <i>Webpage</i>	Monthly EVV newsletters highlighting program changes/updates. <u>Subscribe</u> to ODM EVV communications.
<u>EVV Webinars</u> <i>Webpage</i>	The ODM EVV team hosts monthly webinars and post the recording and slides from each webinar. Upcoming and historical webinars can be found on the ODM EVV webpage.
<u>EVV Tools and Helpful Documents</u> <i>Webpage</i>	ODM webpage for helpful documents on the EVV program, Sandata system, telephony, devices, payor systems and Zendesk Sandata help desk portal.
<u>Programs and Procedure Codes Included in EVV</u> <i>pdf document</i>	List of covered programs and services subject to EVV requirements, listed by payor.
<u>Time to Units Conversion</u> <i>pdf document</i>	Time to units' conversion for EVV services, by payor.
<u>Sandata Help Desk Ticketing portal – Zendesk</u> <i>Webpage</i>	Helpdesk portal to access open and historical tickets submitted by users to Sandata and the ODM EVV team.